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DE RUEHJA #1492/01 1451051  
ZNR UUUUU ZZH  
R 251051Z MAY 07  
FM AMEMBASSY JAKARTA  
TO RUEHC/SECSTATE WASHDC 4879  
RUEHPH/CDC ATLANTA GA  
INFO RUEAUSA/DEPT OF HHS WASHINGTON DC  
RUEHRC/USDA FAS WASHDC  
RHEHNSC/NSC WASHDC  
RUEHXS/ASSOCIATION OF SOUTHEAST ASIAN NATIONS  
RHHMUNA/HQ USPACOM HONOLULU HI  
RHHMUNA/CDR USPACOM HONOLULU HI//J07/CATMED/CAT//  
RUEHBK/AMEMBASSY BANGKOK 7962  
RUEHBY/AMEMBASSY CANBERRA 0781  
RUEHFR/AMEMBASSY PARIS 1005  
RUEHGV/USMISSION GENEVA 7573

UNCLAS SECTION 01 OF 02 JAKARTA 001492

SIPDIS

SENSITIVE  
SIPDIS

DEPT FOR EAP/MTS, G/AIAG AND OES  
USAID FOR ANE/CLEMENTS AND GH/CARROLL  
DEPT ALSO PASS TO HHS/WSTEIGER/ABHAT/MSTLOUIS AND HHS/NIH  
GENEVA FOR WHO/HOHMAN

E.O. 12958: N/A

TAGS: [TBIO](#) [AMED](#) [CASC](#) [EAGR](#) [AMGT](#) [PGOV](#) [ID](#)

SUBJECT: INDONESIA-MAY 25 AVIAN INFLUENZA (AI) UPDATE

REF: A) Jakarta 1331 B) Jakarta 1319 and previous

¶1. (SBU) Summary. Permanent and TDY staff from the Centers for Disease Control and Prevention (CDC) arrived the week of May 14 and met with numerous Ministry of Health officials. Indonesia media closely followed World Health Assembly (WHA) events and reported the outcomes as a resounding Indonesian success. The Ministry of Health (MOH) reported two fatal human AI cases the week of May 21, and CDC and NAMRU experts expect an additional 4-6 human AI cases a month and occasional clusters until the disease is contained in the animal population. The MOH has sent no additional AI samples to the World Health Organization (WHO) Collaborating Center in Tokyo since May  
¶10. End Summary.

CDC Permanent Staff Arrive  
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¶2. (U) Permanent and temporary CDC staff visited Jakarta May 11-24 to meet with Government of Indonesia (GOI) personnel in preparation for establishing a CDC office in Jakarta. The team met with staff of the Directorate General of Disease Control and Environmental Health (LITBANGKES), WHO Indonesia, Eijkman Institute, the main infectious disease hospital in Jakarta (RSPI), NAMRU-2, USAID, National AI Committee (KOMNAS), Food and Agricultural Organization, and the Mission's Avian Influenza Working Group. The main purpose of the visit was to introduce Dr. Frank Mahoney and Dr. Mike Thomas as the Jakarta based CDC staff who will be working at the Ministry of Health, Directorate General of Disease Control and Environmental Health (Indonesian CDC) for two years to assist with influenza surveillance, avian influenza related activities, and pandemic preparedness. The group discussed the current CDC Cooperative Agreements, and activities related to disease and laboratory based surveillance, training, and pandemic preparedness.

Local Media Declares Victory for Indonesia at WHA  
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¶3. (U) Indonesian media outlets have featured numerous positive stories about the outcomes of the May 14-23 World Health Assembly. Stories reported on Minister Supari's May 15 announcement that Indonesia would resume sample sharing; Indonesia's selection as a member of the WHO Executive Board; and unanimous approval of what

they termed "an Indonesian draft resolution" on sample sharing. A representative of Antara, Indonesia's official news service, reported on May 22 that Minister of Health Supari claimed "almost 100 percent of our proposal has been accepted unanimously...Automatically, it will be part of an international health regulation binding all WHO member counties," she said.

¶4. (U) The Koran Tempo similarly reported on May 24 that developed countries will "no longer take advantage of developing countries" hit by the bird flu disease. "The resolution will bind all WHO members," wrote Director General of Disease Control and Environmental Health of the Health Ministry, I Nyoman Kandun, in his short message to Tempo. "Virus sample delivery must be done transparently, responsibly, and be beneficial for all parties in maintaining the health of the world community."

#### Sample Sharing Update

¶5. (SBU) Despite media reports, we have seen no evidence that the GOI has shared samples beyond the three specimens the MOH sent to the WHO Collaborating Center in Tokyo on May 10 (Ref B). NAMRU-2 continues to provide diagnoses on human samples acquired from its own influenza surveillance network. The current backlog of samples will likely continue to grow, as both NAMRU-2 and the visiting CDC Medical Epidemiologists anticipate that sporadic individual cases and occasional family clusters will continue in Indonesia in the coming months until the GOI controls the disease in the animal population and improves community awareness.

#### AI Human Case Reports

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¶6. (SBU) The MOH reported two new human AI cases the week of May 21. During the WHA, the WHO agreed to accept Ministry of Health confirmations as official cases. However, WHO numbers may lag MOH counts by several days. NAMRU-2 figures reflect confirmed NAMRU cases only, and do not include a number of the human AI cases the MOH has reported since December 2006. Table 1 lists the various Indonesia AI counts as of May 25.

Table 1: Indonesia AI Case Counts (5/25/07)

Organization	No. Cases	No. Deaths	Fatality Rate
MOH (1)	98	78	80%
WHO	97	77	79%
NAMRU-2	83	64	77%

(1) NAMRU-2 tested two of above MOH confirmed cases and found samples to be negative for H5N1.

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